

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	<i>Nuredin</i>		<i>08-09-01</i>
I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>MVR</i>	<i>572</i>	<i>09-25-01</i>
RESPONSE FORMALITY REVIEW	<i>BZ</i>	<i>797</i>	<i>09-22-02</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	10	1	
2	1	2	
3	1	3	
4	1	4	
5	1	5	
6	1	6	
7	1	7	
8	1	8	
9	1	9	
10	1	10	
11	1	11	
12	1	12	
13	1	13	
14	1	14	
15	1	15	
16	1	16	
17	1	17	
18	1	18	
19	1	19	
20	1	20	
21	1	21	
22	1	22	
23	1	23	
24	✓	=	
25	✓	N	
26	✓		
27	✓		
28	✓	N	
29	✓	=	
30	✓		
31	✓		
32	✓	=	
33	✓	N	
34	✓		
35	✓		
36	✓		
37	✓		
38	✓		
39	✓		
40	✓		
41	✓		
42	✓	✓	
43	✓	✓	
44	✓	N	
45	✓		
46	✓		
47	✓		
48	✓		
49	✓		
50	✓	N	

Claim	Final	Original	Date
51	✓	10	21
52	✓	11	22
53	✓	12	23
54	✓	13	24
55	✓	14	25
56	✓	15	26
57	✓	16	27
58	✓	17	28
59	✓	18	29
60	✓	19	30
61	✓	20	31
62	✓	21	32
63	✓	22	33
64	✓	23	34
65	✓	24	35
66	✓	25	36
67	✓	26	37
68	✓	27	38
69	✓	28	39
70	✓	29	40
71	✓		
72	✓		
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92	✓		
93	✓		
94	✓		
95	✓		
96	✓		
97	✓		
98	✓		
99	✓		
100	✓	N	

Claim	Final	Original	Date
101	✓	10	21
102	✓	11	22
103	✓	12	23
104	✓	13	24
105	✓	14	25
106	✓	15	26
107	✓	16	27
108	✓	17	28
109	✓	18	29
110	✓	19	30
111	✓	20	31
112	✓	21	32
113	✓	22	33
114	✓	23	34
115	✓	24	35
116	✓	25	36
117	✓	26	37
118	✓	27	38
119	✓	28	39
120	✓	29	40
121	✓		
122	✓		
123	✓		
124	✓		
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143	✓		
144	✓		
145	✓		
146	✓		
147	✓		
148	✓		
149	✓		
150	✓		

If more than 150 claims or 10 actions
staple additional sheet here